

EXHIBIT 4

4 LARRY D. THOMAS,
COMPLAINANT,

5 V. Case No. 2001-0619
6 . 2004102917
7 CENTRAL ALABAMA VETERANS
HEALTHCARE SYSTEM,
8 RESPONDENT

SWORN STATEMENT OF TY BEASLEY

Thursday - October 21, 2004
3:00 p.m. - 3:48 p.m.

APPEARANCES:

19 DEPARTMENT OF VETERANS AFFAIRS
OFFICE OF RESOLUTION MANAGEMENT
20 Ten Thousand Bay Pines Boulevard
Building 37, Room 112
21 Bay Pines, Florida 33708
BY: WINSTON JOHNSON
22 EEO SPECIALIST



1 TY BEASLEY,
2 A witness, called for examination, after being duly
3 sworn or affirmed, was examined and testified as
4 follows:

5 EXAMINATION

6 BY INVESTIGATOR JOHNSON:

7 Q. For the record, my name is Winston
8 Johnson, EEO Investigator, taking a telephonic
9 affidavit for the complaint of Larry D. Thomas
10 against the Central Alabama Veterans Healthcare
11 System, West Campus, Case Number
12 200I-0619-2004102917.

13 Would you state for the record your
14 name and spell it, please.

15 A. My name is Ty Beasley, T-Y is the
16 first name, and the last name is B-E-A-S-L-E-Y.

17 Q. You have the right to have a
18 representative present, do you have a
19 representative?

20 A. No, Sir, I do not.

21 Q. Would you like to proceed without
22 one?

1 A. Yes.

2 Q. Where are you employed?

3 A. I am employed at the VA Central
4 Alabama Healthcare System in Montgomery, Alabama.

5 Q. And how long have you been employed
6 at this facility?

7 A. Well, my most recent position has
8 been a little less than two years.

9 Q. And what is your title and grade?

10 A. My title is the Pharmacy Program
11 Specialist. I do lead the Clinical Informatics
12 Team, but if you're asking what my personnel title
13 is, it's Pharmacist Programs Specialist. But the
14 activity, the leadership I provide, it's the
15 Clinical Informatics Team Leader, and my grade is
16 GS-13.

17 Q. And who is your first-level
18 supervisor?

19 A. My first-level supervisor is William
20 Greer. He's the CIO of Central Alabama Healthcare
21 System.

22 Q. This investigation will focus on the

1 claim accepted for investigation. I will read the
2 claim into the record before you respond to it.
3 Claim, termination during probationary period.
4 Whether on the basis of race (black), the
5 Complainant was discriminated against when on or
6 about May 14, 2004, the Chief Information Officer,
7 William Greer, informed him that at the end of the
8 workday, his employment as the VistA Imaging
9 Implementation Manager, GS-12, would be terminated
10 during his probationary period for failure to
11 successfully perform the duties of the position.
12 Since this complaint is based on the Complainant's
13 race, what is your race?

14 A. Caucasian.

15 Q. Do you know the Complainant?

16 A. Yes, I do.

17 Q. How do you know the Complainant?

18 A. I became acquainted with him as an
19 employee in Central Alabama, that's when I first
20 met him.

21 Q. And what role did he play on the
22 Information Technology Team?

1 A. The position he was hired to was, as
2 you're already documented, was as the VistA Imaging
3 Implementation Manager. That position -- did you
4 want me to elaborate on what the position is, or --

5 Q. No, you won't need to do that.

6 A. Okay.

7 Q. Did you have a role in the selection
8 process for when the Complainant was hired?

9 A. I actually was on the interview team
10 when the interviews were conducted to fill that
11 position. And in so doing, we what did was use a
12 performance-based interview process, and each of
13 the interviewers, you know, graded each applicant,
14 and that information was sent to the CIO, the
15 Acting CIO at that time, for selection.

16 Q. And who was the Acting CIO at the
17 time?

18 A. Harald Carlisle.

19 Q. In a memo dated June 17, 2004,
20 William Greer, Chief Information Officer,
21 identified factors the Complainant's termination
22 was based upon. Mr. Greer stated the Complainant

1 superceded the directions of the VISN Initiative,
2 and his interpersonal communication did not promote
3 goodwill. Could you comment on this assessment of
4 the Complainant's performance?

5 A. Larry, I guess, in my opinion, Larry
6 often had difficulty even from the beginning, in
7 trying to be the Implementation Manager and doing
8 the job that needed to be done. What was expected,
9 in my opinion, in this position, was to come in
10 with the skill-set necessary to effect the program
11 we were trying to implement, and get it implemented
12 in short order, successfully, to provide training
13 to endusers of various -- you know, some
14 clinicians, some not -- and to sustain the program
15 after it was implemented to the point where things
16 were going well.

17 It seemed that he was -- from the
18 very beginning and, I think, all the way through
19 the end of his employment, he was always struggling
20 to do that.

21 Q. The Complainant stated that the Chief
22 of Staff asked him to develop a software package to

1 help Primary Care expedite their processes. The
2 Complainant stated he developed a demonstration
3 package for the service, but there wasn't any
4 funding to implement it. Do you have knowledge of
5 this request?

6 A. What did he call the request?

7 Q. They requested him to develop a
8 software package where they could expedite certain
9 processes. I think they was using
10 transcriptionists to produce, and they asked him to
11 create a software package that they could use to
12 expedite this process.

13 A. I am not aware of that, but I have
14 some information that could be related, I guess.
15 At one time, Primary Care, which is one of our
16 service lines, was asking for assistance in how to
17 -- to look at some different solutions to
18 dictation, which would be voice recognition
19 software, that providers, the clinicians, could use
20 instead of typing their notes and things into the
21 computer. I do know that Larry assisted them by
22 obtaining -- getting one of the vendors, I think it

1 was Dragon Dictate, D-R-A-G-O-N, Dictate Company,
2 to provide a web meeting, which we conducted from a
3 training room, and several of the key state coders
4 were there for that demo. But that was just to --
5 his only function was to facilitate a demonstration
6 by the vendor, it wasn't to develop a software
7 application.

8 And at the time, the understanding
9 was is that once we facilitated the information
10 that they could get, it was up to the Primary Care
11 Service Line to try and proceed with trying to
12 purchase the product and implement it. Does that
13 sufficiently answer your question?

14 Q. Yes.

15 A. Okay.

16 Q. The Complainant challenged
17 Mr. Greer's statement that his communications did
18 not promote goodwill. He claims he had a pretty
19 good rapport with everybody, including service
20 chiefs, managers, and supervisors. Could you
21 comment on Complainant's assessment of his
22 communication with managers?

1 A. Well, there was a few elements to
2 that, I think, in my opinion. Verbal
3 communications and then, separately, written. Let
4 me take verbal first. You know, Larry was
5 encouraged, as Implementation Manager, to go out
6 and meet with clinical service leaders and managers
7 about the VistA Imaging Implementation and sit down
8 with them and discuss how they wanted training
9 done, develop training calendars, keeping them
10 informed.

11 What we heard -- and, you know, the
12 information that kind of came back by various
13 methods, was that he didn't communicate well with
14 the people, they didn't seem to take the
15 communications in a positive manner. There were
16 times when I personally met with him and other
17 service managers just to make sure that things went
18 well. It seemed that if there was any strain with
19 communications that I would be there to help out
20 with the discussion. But often, you know, people
21 were either offended or said that the information
22 he was given them was inaccurate, based on their

1 own knowledge of policies and procedures, and it
2 just didn't seem often to be well-taken. Now from
3 a written communications point of view --

4 Q. And we're probably going to discuss
5 the written communication later.

6 A. Okay.

7 Q. The e-mails, and that type of stuff.
8 Mr. Greer stated the Complainant lacked
9 understanding of organizational internal processes
10 and community structures. Would you comment on
11 this assessment in regard to Complainant's
12 understanding of these processes and structures.
13 Like committees and internal organizational
14 processes?

15 A. Sure. I -- you know, there were
16 times when I would spend time with Larry, I tried
17 to help facilitate his understanding of the VA
18 structure. He, as well as many other employees,
19 including myself, were always recipients of
20 messages that came from our front office or our
21 senior leadership about organizational structure.
22 Many times these had attachments, had work charts,

1 so we could understand the changes in the
2 organization and who fulfilled certain positions,
3 so if you were looking for someone in a leadership
4 position, you knew the right person to go to.

5 He constantly struggled with that,
6 even when he was given directions by me, sometimes,
7 saying that these are the people you need to talk
8 to to get this done. And I was doing that, really,
9 as in an advisory role, not as his supervisor, but
10 trying to help him. And he didn't seem to get a
11 good grasp for organizational structure, and was
12 constantly, you know, going to the wrong people, or
13 inappropriate people to get certain things done.
14 So it often led to delays in getting things done,
15 and sometimes frustration on the behalf of the
16 users that were contacted when they shouldn't have
17 been.

18 Q. The Complainant testified that he
19 requested to be on several different committees,
20 but Mr. Greer and Mr. Carlisle decided that he did
21 not need to be on these committees. Do you have
22 any relevant knowledge related to these requests by

1 the Complainant?

2 A. No, Sir, I don't. I don't have any
3 information related to that.

4 Q. The Complainant testified he Chaired
5 the VistA Imaging Project Committee, and scheduled
6 weekly meetings which were attended by Imaging
7 Personnel, and some individuals from the service
8 lines. Could you comment on his leadership and
9 organizational leadership in this committee?

10 A. Well, in my opinion -- because I
11 wasn't actively involved in that, I wasn't actively
12 involved in this Imaging Implementation, but I was
13 knowledgeable of his efforts to do that.

14 The two perspectives I got is that
15 there were times when others didn't participate
16 actively, but there were also times when Larry did
17 not participate actively. So it was somewhat
18 discouraging to others, thinking that well, it must
19 not be that important if he's not here to conduct
20 the meeting. So that's generally some of the
21 things I was hearing. I don't know if it really
22 was that constructive or not. I think the

1 intention was good, to get people together
2 face-to-face to discuss implementation issues, but
3 it didn't seem to go that well, so I don't think it
4 was successful.

5 Q. In addition, the Complainant stated
6 that the system was not ready for implementation,
7 which was the System Manager's responsibility, but
8 it reflected upon him. Could you comment on this
9 assessment?

10 A. I think the system was ready to be
11 implemented, but it did require that someone come
12 in and roll up their sleeves and proactively engage
13 by teaching themselves, learning everything they
14 could, and reacting to requests. I do know that we
15 had implementation managers that were external to
16 us, they were key to our implementation. They
17 actually would come here and help set the
18 infrastructure up and get things going. And from
19 my perspective, the systems side of it was fairly
20 uneventful. As a matter of fact, I think one of
21 the National Implementation Managers was
22 complimentary of our System's Manager for having

1 made it a smooth transition.

2 What I do think was bumpy was the
3 actual implementation from a roll-out of the
4 application, which was primarily what Larry worked
5 with the Implementation Manager to do -- I mean,
6 the System's Manager, excuse me. His role was
7 primarily to take -- technically what has been put
8 into place and help provide it to the clinicians,
9 train them, and get things running, from an enduser
10 perspective, so ultimately, the clinicians and the
11 other users that needed to view the images, could
12 do that with little effort.

13 Q. Mr. Greer stated the Complainant's
14 training and documentation were of such poor
15 quality, that the training sessions had to be
16 presented to IT staff members for review prior to
17 client presentation. Could you comment on this
18 assessment of the Complainant's lack of training
19 expertise?

20 A. That, in fact, was necessary, because
21 the preliminary drafts of training material looked
22 to be incomplete. Not very coherent, I guess, as

1 far as putting the ideas together. So it did
2 require that we had internal analysis training
3 before it actually went realtime. There were a lot
4 of errors in the spelling and in the sentence
5 structure and things like that, so I could
6 substantiate that that was necessary.

7 Q. The Complainant testified that the
8 VISN provided him with two hours of training, which
9 Mr. Beasley, yourself, believed was not good enough
10 to train the medical staff. You stated that you
11 suggested that they gather the available
12 information, develop a new package, and present it
13 to the IT Staff prior to presenting it to the
14 medical staff. He stated that the training
15 demonstration for the IT Staff was a team effort to
16 improve the finished product. Mr. Greer viewed the
17 exercise as the grading of the trainer. Could you
18 comment on this training exercise?

19 A. Well, I wouldn't agree fully with the
20 statements. One thing about the training and the
21 length of it is that I don't recall ever going on
22 record or saying that I felt two hours was

1 inadequate. You have different audiences and
2 different portions of VistA Imaging to train on,
3 it's not just one-size-fits-all for training. The
4 most comprehensive part of the training could have
5 easily been done in two hours.

6 I think that there was a bit of
7 resentment between Larry and some of the VISN Vista
8 Imaging personnel that actually came here to
9 observe and evaluate our program about the length
10 of time. They were very assertive about, you know,
11 it doesn't take that much time. And to get
12 clinicians that are very busy individuals in for
13 training, you have to streamline your training, cut
14 it down and make it very specific and not very long
15 in duration. And I do know that there was a very
16 significant difference between their opinion and
17 his opinion of how long the training needed to be.

18 But I didn't really have a strong
19 opinion about that. I felt that that was something
20 that was more between him and the VISN, I wasn't
21 really in a role of telling him how long his
22 training should be or not.

1 Q. The Complainant testified that he was
2 the best-qualified trainer on the staff in regards
3 to Microsoft and VistA Imaging training. Could you
4 comment on the Complainant's assessment of his
5 expertise as a trainer?

6 A. I wasn't real impressed with his
7 expertise as a trainer. I do know that his
8 application package and all, he had lots of things
9 that he cited, certifications and all. But it
10 didn't really fit, the qualifications didn't really
11 fit the real result that we saw, or at least what I
12 saw in my opinion. So I think Larry was okay as a
13 trainer, but he certainly wasn't more qualified
14 than others on our staff by any measure.

15 Q. In addition, the Complainant
16 testified that when he presented the training to
17 the medical staff to learn how to utilize the VistA
18 Imaging Program throughout the hospital, and it was
19 reflected in the training evaluation. Could you
20 comment on the Complainant's assessment of the
21 implementation training that he give the staff?

22 A. I wasn't present for a majority of

1 that, those trainings, so I really can't speak to
2 the quality of it. As far as evaluations, I know
3 there were times when Larry cited that, you know, I
4 always get good evaluations, but I'm not sure our
5 evaluation process is that valid of a process.
6 Because when you conduct training, and you give
7 someone an evaluation form right after the
8 training, and say here, complete this, and they
9 hand it back to you, I think that individuals
10 sometimes are somewhat hesitant to be, you know,
11 honest about their true evaluation. Some of the
12 clinicians, you know, they just want to get out of
13 there.

14 So if you give them the impression
15 that I need to complete the evaluation form and
16 leave, then people just rush through it, I don't
17 think they give it a lot of thought. But I also
18 think it's somewhat uncomfortable to have to
19 complete an evaluation form in the presence of the
20 trainer.

21 **Q. Mr. Greer stated that the**
22 **Complainant's written composition was of such poor**

1 quality, that the clinical team leaders needed to
2 review electronic messages for accurate
3 professional content prior to electronic mailing.
4 Could you comment on this assessment of the
5 Complainant's written communications?

6 A. That is true, in my opinion. I mean,
7 I picked up on it fairly soon as he began to
8 communicate with the staff. His messages were
9 often very poorly constructed, often words were
10 misspelled, sentence structure was not good. His
11 communication in general was not that good. And I
12 did make efforts to give him feedback, constructive
13 feedback, saying before you send this out, you may
14 want to consider these changes or consider redoing
15 your letter or your e-mail. That was not just not
16 one occasion, but several occasions. And I think
17 it got to the point where, you know, we had to
18 request that nothing could go out until it was
19 actually reviewed.

20 Because people's perceptions were,
21 you know, when you get a message from a
22 professional, and it's not written well, people

1 draw conclusions like well, how qualified or how
2 educated, or whatever, is this individual if
3 they're writing this way? So I think it did send
4 out a negative message letting the messages go out.
5 So we decided to do that, and I made a lot of
6 effort to help Larry with that. We also offered to
7 tell him, you know, you need to seek out additional
8 training when you can. Maybe consider college
9 courses, things like that, that could help him
10 improve his communication and writing skills.

11 Q. The Complainant conceded that e-mails
12 were often hurried to meet deadlines mandated by
13 Mr. Greer. He stated that there were some errors,
14 but the message was clear. Could you comment on
15 the Complainant's assessment of the message being
16 clear?

17 A. I don't think there were many times
18 when they were not clear at all, and it would have
19 been detrimental to send them out had they not been
20 reviewed and corrected before they were actually
21 distributed to an outside audience. And I have
22 first-hand experience dealing with those kinds of

1 messages, so I'm not sure I understand what he
2 meant by being hurried. A lot of people in high
3 positions have deadlines to meet and schedules,
4 that's part of the reason you're in those
5 positions, and you have a skill-set that can
6 accommodate reacting in short order to issues and
7 being able to communicate clearly with people.

8 Q. Have you had the opportunity to
9 review other written documents generated by the
10 Complainant, other than e-mails?

11 A. Yes, I reviewed some training
12 material, training documents that he used to issue
13 to people that he trained, e-mails, and that's
14 about all I can recall. But that's generally the
15 way we communicate here, through e-mail. I don't
16 remember if there were any document attachments
17 that I supplied.

18 Q. Describe the quality of the training
19 materials that --

20 A. They needed to be corrected before
21 they were ready for distribution to the trainees.
22 It was not -- you could tell that he used a lot of

1 things that came off of other training documents.
2 But then, the way it was kind of put together, you
3 know, it lacked a little bit of coherence. Some of
4 the wording between screen captures and things like
5 that, he did get off of web sites that was not
6 correct, and had to be corrected from time to time.

7 Q. Mr. Greer alleged a security
8 violation when the Complainant allowed his son to
9 use a government laptop to install sharing files.
10 Do you have relevant knowledge related to this
11 alleged security violation?

12 A. No, Sir. All I know is that I
13 assisted Larry in getting permission to use the
14 laptop, to get a laptop issued to him through the
15 VA, so he could use it for training purposes as he
16 moved across campuses and things like that. But I
17 don't have any direct knowledge of the security
18 violation.

19 Q. Mr. Greer stated that had the
20 Complainant's message that the communication did
21 not always promote goodwill, often alienated the
22 clients and managers. Could you comment on this

1 **assessment of his method of communication?**

2 A. Well, we talked some during this
3 interview about the fact that his communications
4 were not that good. But as far as how they were
5 received, you know, you can only go by how people
6 respond. And I will tell you that there were
7 several people in management and senior leadership
8 positions, they were either offended or didn't
9 appreciate the tone of the communication that was
10 sent to them, and made that known to us. So, you
11 know, there were several, I think, over the period
12 of his employment that responded that way.

13 Q. The Complainant testified that he
14 only had a problem with one manager, William Piper.
15 Because Mr. Piper, he yelled at a supervisor about
16 a concern prior to giving the Complainant the
17 opportunity to resolve it between them. He stated
18 he worked well with the other managers. Do you
19 agree with that?

20 A. No I wouldn't. Although Larry had
21 good intentions, but I don't think the other
22 managers' perception was that good of how well they

1 worked with him. I do know that there was a level
2 of -- I don't know what you could call it,
3 friction, for example, between Mr. Piper and Larry.
4 But I think that's only because the importance of
5 the VistA Imaging personnel working with the
6 Biomedical Engineering personnel. And the reason
7 that that was necessary is a lot of the medical
8 instruments were maintained by the Biomedical
9 Engineering Team, and many of those instruments
10 would interface or need to be interfaced. So there
11 was a need to have a good working relationship with
12 that staff to be successful as the Implementation
13 Manager. And I think the system's manager
14 maintained probably a better working relationship
15 with them than he did.

16 Q. Mr. Greer stated based on the
17 Complainant's lack of clinical background, he could
18 not obtain a grasp of clinical needs, roles, and
19 responsibilities. Could you comment on this
20 assessment of Complainant's lack of awareness in
21 regard to clinical needs?

22 A. Yes, I think he lacked a perspective.

1 I don't think he had any experience in that area,
2 so I don't know if, you know, it just didn't seem
3 that he grasped the clinical environment that well
4 compared to a non-clinical environment. You know,
5 there's a lot of clinical people, there's nurses --

6 (Discussion was held off the record.)

7 BY INVESTIGATOR JOHNSON:

8 Q. About the clinical awareness of the
9 -- in regard to clinical needs.

10 A. Okay, let me continue. I don't think
11 Larry brought a background of working in a clinical
12 environment with him, and it was very difficult for
13 him to work in this new environment. It often led
14 to misunderstandings, you know, about what the
15 clinical staff really needed in training, versus
16 what his perception was. So I do think it was a
17 lack of clinical background, or working in the
18 clinical setting did add to his problems with
19 performing the job.

20 Q. Complainant testified that he worked
21 well with clinical side of the hospital, and
22 possessed a good understanding of their needs.

1 Could you comment on his assessment of his grasp of
2 clinical needs?

3 A. Well, I wouldn't agree. In my
4 opinion, because we, you know, in order to balance
5 things -- then again, I think I know as an outsider
6 looking in, but I do know that our network, our
7 VISN, V-I-S-N, personnel would be asked to come to
8 evaluate how we were doing, and to make a site
9 visit. And I do know that based on their site
10 visit and their assessment, there were often major
11 issues with their perception of how he was doing
12 the training, as opposed to what they felt that the
13 clinicians needed. And there was a time when he
14 disagreed with them. He said -- we have one doctor
15 from Dublin, I think, that actually was acutely
16 involved in the Vista Imaging Initiative across our
17 network, and came and worked with him. And some
18 other clinicians actually sitting in on training
19 sessions tried to advise him, saying you need to
20 modify your training, you need to cut it down, you
21 need to streamline it. And I think he was fairly
22 adamant to disagree with them. So in that sense, I

1 think it hurt him.

2 Q. How would you describe the
3 Complainant's interactions with the female staff
4 members?

5 A. Well, in my opinion, there were times
6 when -- I never witnessed anything, myself, that
7 would be considered inappropriate or strained, as
8 far as --

9 Q. Are you aware of any allegations of
10 inappropriate conduct?

11 A. Yes, there were times when people
12 would contact us, or I have understood they had
13 contacted us about issues with interpersonal, I
14 guess, reactions with him, or interactions with
15 him. You know, there were some fairly, I thought,
16 significant complaints. But I would have no
17 knowledge of whether they were substantiated or
18 not.

19 Q. What type of complaints?

20 A. Sexual-type comments, or handling
21 himself in private parts of his body during
22 conversations or interactions with them. You know,

1 just a general feeling they felt uncomfortable
2 because of, I guess, the type of interactions at
3 the time. At one point, lingering in offices, not
4 taking care of whatever they came for and then
5 leaving, but staying around, trying to have
6 friendly talk and just, you know, probably being
7 too friendly, if I had to sum it up.

8 Q. How would you characterize the
9 Complainant's working relationship with Ms. Venne,
10 the System's Manager, Ms. Saundrah Venne?

11 A. Very strained, in my opinion.

12 Q. The Complainant testified that he was
13 interviewed telephonically for the position. The
14 interview panel assumed, based on his diction, that
15 he was white. He stated that you were shocked when
16 you greeted him and realized he was black. Could
17 you comment on this assumption?

18 A. That's very untrue. You know, we
19 don't interview based on color, race, or ethnicity,
20 or anything like that. But I will tell you that --
21 honestly speaking, I will tell you I have grown up
22 in the South, and he did too, so it was fairly easy

1 for me to tell who I was talking to, but it didn't
2 bear any significance to what I was doing. I
3 evaluate people based on the information that I
4 have in front of me, plus the answers that they
5 give to the questions. And I was not shocked when
6 he came and presented himself. I had never met the
7 man before, but believe me, I had a general
8 understanding that he was, you know, black. And
9 really, I had no problem with that. As a matter of
10 fact, I probably rated him pretty high on his
11 performance-based interview based on the
12 information that was given during the interview.
13 So I don't think that can be substantiated.

14 Q. The Complainant stated that shortly
15 after his six-month evaluation, Mr. Greer requested
16 the Complainant provide copies of his training
17 certificates. Do you have relevant knowledge
18 related to this request?

19 A. I do know that Mr. Greer had asked
20 for documentation, simply because many things were
21 cited in his application, his official application,
22 that indicated that he had certification, like

1 Microsoft Certification and training, or
2 Microsoft-certified engineer -- you know, these
3 certifications generally require, you know, a good
4 bit of training and documentation. And I guess the
5 thought was is that based on his performance, his
6 -- he seemed not to know much about a lot of the
7 Microsoft applications that he was so-called
8 certified in, which led, I guess, to some suspicion
9 that were the documents valid or not. And I think
10 once they saw them and they were valid, then it was
11 a non issue. But I think the reason that it was
12 required at the time was, you know, if you're a
13 Microsoft-certified professional, and you're having
14 difficulty using one of the Microsoft products that
15 you were certified in, I mean, you should be almost
16 an expert in that. And many of them, he was
17 challenged, very challenged in trying to use those.

18 **Q. The Complainant stated that he could
19 not get approval for overtime, do you have relevant
20 knowledge related to this alleged denial?**

21 A. There were times when he did get
22 overtime. But I think, due to our budgetary

1 constraints, not only he, but others, if they did
2 work over their tour, were offered comp-time to
3 make up for the extra time that they had placed in.
4 So, you know, at one time -- the overtime dollars
5 are very limited, and they felt that because they
6 were being consumed at a pretty high rate due to
7 special training, and it's just before work or
8 after work that were requested by the clinical
9 staff, that we had to shift to comp-time instead of
10 overtime.

11 But that was not just for him, it was
12 everyone, and the overtime dollars were spent on
13 the overtime staff that covered the hospital at
14 night, weekends, and holidays that work 24 hours
15 and were actually on call.

16 Q. Do you have any reason to believe the
17 Complainant's termination during his probationary
18 period was influenced by his race?

19 A. No, Sir.

20 Q. Do you have any additional
21 information that you would like to add regarding
22 the claim that you have not already shared with me,

1 something that I may have missed that would clarify
2 any of these issues?

3 A. No, Sir, I don't.

4 Q. And Dr. Beasley, I would like to ask
5 you at this time, would you like a copy of your
6 transcript?

7 A. If I it would be possible, it would
8 be nice to have, Mr. Johnson, just so I could
9 review it and just make that, you know --

10 Q. Not a problem.

11 A. Because the communications were a
12 little strained, I want to make sure the point I
13 was trying to make was well-made. So how will that
14 be transmitted to me?

15 Q. I will send it to you Fed Ex. Let me
16 give you some guidelines, here, and then I will get
17 an address where you would prefer to have your
18 transcript mailed to you.

19 A. Sure.

20 Q. These are the guidelines you must
21 follow when you receive the transcript, it's going
22 to be part of the record.

1 A. Okay.

2 Q. The witness may not make any mark on
3 the transcript itself, but all corrections shall be
4 made on the errata sheet that is provided with the
5 transcript. Any changes to the original transcript
6 will not be included into the investigative file.
7 The signed transcript and correction sheet are to
8 be returned by mail to the investigator within
9 seven calendar days of the witness' receipt.

10 If the signed transcript and
11 corrections sheet are not returned to the
12 investigator within seven calendar days, it will be
13 deemed that the witness has waived his right to
14 review, correct, and sign. Witnesses will be
15 encouraged to keep a copy of the errata sheet and
16 the transcript, and the witness may not make
17 substantial changes to their testimony.

18 I am going to mail this to you Fed
19 Ex, and you must provide an address and telephone
20 number where you would prefer to receive your
21 transcript.

22 A. Okay. Well, since you're going to

1 Fed Ex it, it will probably be safer to send it to
2 my home instead of work, is there any problem with
3 that?

4 Q. Not a problem.

5 A. Okay. Under my name, address would
6 be [REDACTED] that's two words, [REDACTED]
7 [REDACTED]. That would be Montgomery, Alabama,
8 zip [REDACTED]. Home telephone number is area code
9 [REDACTED].

10 Q. Okay, is any time to deliver -- what
11 time, maybe?

12 A. I would say --

13 Q. What's the best delivery time?

14 A. Probably in the afternoons between
15 1:00 and 4:00.

16 Q. Okay. Dr. Beasley, This ends your
17 sworn statement, thank you for your time and
18 cooperation.

19 (Whereupon, the affidavit was
20 concluded at 3:48 p.m.)

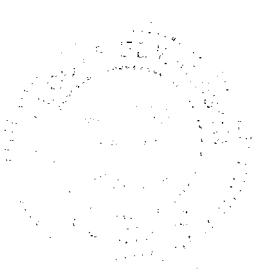
21

22

34

CERTIFICATE OF COURT REPORTER

I, Rebecca Edwardson, a Notary Public in and for the State of Colorado, before whom the above-entitled cause was taken, do hereby certify that the proceedings were taken by me in shorthand and thereafter reduced to typewriting under my supervision; that said proceedings is a true record; that I am neither counsel for, related to, nor employed by any of the parties to the action in which the proceedings were taken; and, further, that I am not a relative or employee of any attorney or counsel employed by the parties thereto, nor financially or otherwise interested in the outcome of the action.


Rebecca Edwardson
Rebecca Edwardson
Notary Public in and for
THE STATE OF COLORADO

My commission expires:
July 7, 2007

1 IN THE MATTER OF:)
2 LARRY D. THOMAS)
3 Complainant,) Complaint No.
4 Vs.) 200I-0619-
5 CENTRAL ALABAMA VETERANS) 2004102917
6 HEALTHCARE SYSTEM,)
7 Respondent.)
8

9 ACKNOWLEDGMENT OF DEPONENT

10 I, TY BEASLEY, do hereby acknowledge that
11 I have read and examined pages 2 through 34,
12 inclusive, of the transcript of my deposition taken
13 on Thursday, October 21, 2004, and that:

14 (Check appropriate box)

15 [] The same is a true, correct, and complete
16 transcription of the answers given by me to the
17 questions therein recorded.

18 [] Except for the changes noted in the attached
19 Errata sheet, the same is a true, correct, and
20 complete transcription of the answers given by me
21 to the questions therein recorded.

22

20 Date

Signature

35

1

ERRATA SHEET

2	Page and line number	Correction or
	As reported:	Change and reason
3	Therefore:	
4		
5	_____	_____
6	_____	_____
7	_____	_____
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From: Origin ID: (727)319-1171
Winslon Johnson
Dept of Veterans Affairs
Resolution Management (08J)
10000 Bay Pines Blvd.
St. Petersburg, FL 33708



Ship Date: 26OCT04
Actual Wgt: 1 LB
System#: 2453096/INET2000
Account#: S *****

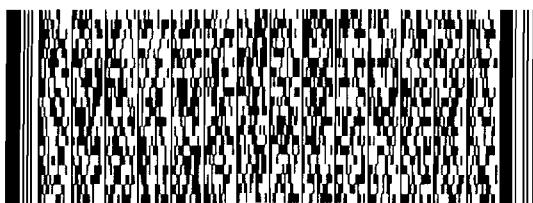
REF:



Delivery Address Bar Code

SHIP TO: [REDACTED] BILL SENDER
Ty Beasley

[REDACTED]
Deliver between 1:00pm and 4:00pm
[REDACTED]



** 2DAY **

TRK# 7919 6479 6726 FORM 0201

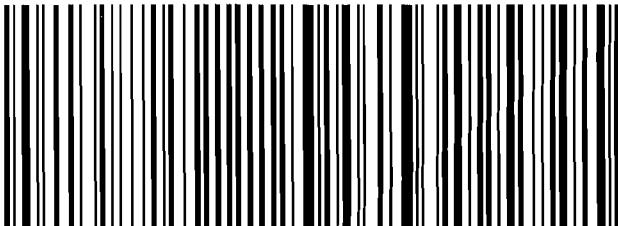
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